Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEVADA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this ar amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name RO Middle name WING Last name and Suffix (Sr., Jr., II, III)	CHRISTINA First name LORINE DAWN Middle name WING Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8603	xxx-xx-2795

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Debtor 1 JAMES RO WING
CHRISTINA LORINE DAWN WING
Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)			
5.	Where you live	4465 BOCA WAY SPACE NO. 68	If Debtor 2 lives at a different address:			
Reno, NV 89502 Number, Street, City, State & ZIP Code			Number, Street, City, State & ZIP Code			
		Washoe County	County			
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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7. The chapter of the Bankruptcy Code you are choosing to file under Chapter 7 Chapter 7 Chapter 11 Chapter 12 Chapter 12 Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office about how you may pay. Typically, if you are paying the fee yourself, you may pay will order. If your attorney is submitting your payment on your behalf, your attorney may pay a pre-printed address. I need to pay the fee in installments. If you choose this option only if you are filing fee in installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing fee but is not required to, waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments. If you do do the fee in installments (Official Form 103B) and file 9. Have you filed for bankruptcy within the last 8 years? District When Case nu Case nu District When Case nu Case nu District When Case nu	n your local court for more details n cash, cashier's check, or money ay with a credit card or check with
Bankruptcy Code you are choosing to file under Chapter 7	n your local court for more details n cash, cashier's check, or money ay with a credit card or check with
Chapter 7 Chapter 11 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office about how you may pay. Typically, if you are paying the fee yourself, you may pay wi order. If your attorney is submitting your payment on your behalf, your attorney may pay a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the The Illing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing fo but is not required to, waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments). If you of the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file No. No. District When Case nu District When Case nu	n cash, cashier's check, or money ay with a credit card or check with a pplication for Individuals to Pay
Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office about how you may pay. Typically, if you are paying the fee yourself, you may pay wi order. If your attorney is submitting your payment on your behalf, your attorney may pay a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments). If you choose this option only if you are filing for but is not required to. Waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments). If you choose this option only if you are filing for but is not required to. Waive your fee, and may do so only if your income is less than applies to your family size and you are paying the fee yourself, you are filing for but is not required to. Waive your fee, and may do so only if you are filing for but is not required to, waive your fee, and may do so only if you are filing for but is not required to, waive your fee, and may do so only if you are filing for but is not required to, waive your fee, and may do so only if you are filing for but is not required to, waive your fee, and may do so only if you are filing for but is not required to, waive your fee, and may request this option, sign and attach the The Filing Fee Waived (Official Form 103A). Page 10 I waive you filed for but is not required to, waive your fee, and may request this option only if you are filing for the fee in installments. If you choose this option, sign and attach the The Filing Fee Waived (Official Form 103A). District Waive Your fee, and may be your fee, and ma	n cash, cashier's check, or money ay with a credit card or check with a pplication for Individuals to Pay
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office about how you may pay. Typically, if you are paying the fee yourself, you may pay will order. If your attorney is submitting your payment on your behalf, your attorney may pay a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing fee but is not required to, waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments). If you cle the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file No.	n cash, cashier's check, or money ay with a credit card or check with a pplication for Individuals to Pay
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office about how you may pay. Typically, if you are paying the fee yourself, you may pay wi order. If your attorney is submitting your payment on your behalf, your attorney may pay a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments). If you of the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file No.	n cash, cashier's check, or money ay with a credit card or check with a pplication for Individuals to Pay
about how you may pay. Typically, if you are paying the fee yourself, you may pay wi order. If your attorney is submitting your payment on your behalf, your attorney may pay a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments). If you of the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file 9. Have you filed for bankruptcy within the last 8 years? No.	n cash, cashier's check, or money ay with a credit card or check with a pplication for Individuals to Pay
The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for but is not required to, waive your fee, and may do so only if your income is less than applies to your family size and you are unable to pay the fee in installments). If you of the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file 9. Have you filed for bankruptcy within the last 8 years? No. District When Case nu District When Case nu District When Case nu	
bankruptcy within the last 8 years? District When Case nu District When Case nu District When Case nu	50% of the official poverty line that oose this option, you must fill out
District When Case nu District When Case nu District When Case nu	
District When Case nu District When Case nu	nber
District When Case nu	
10 Are any bankruptcy ■	
acases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? ■ No Yes.	
Debtor Relations	ip to you
District When Case num	per, if known
Debtor Relations	p to you
District When Case num	per, if known
11. Do you rent your No. Go to line 12.	
residence? ☐ Yes. Has your landlord obtained an eviction judgment against you?	
□ No. Go to line 12.	
Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> this bankruptcy petition.	Form 101A) and file it as part of

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	otor 1 otor 2	JAMES RO WING CHRISTINA LORIN	NE DAWN	I WING		Case number (if known)
Par	t 3:	Report About Any Bu	sinesses	You Own as a S	ole Proprie	etor
12.		ou a sole proprietor y full- or part-time less?	■ No.	Go to Part 4.		
			☐ Yes.	Name and lo	cation of bu	usiness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of busi	ness, if any	/
	If you have more than one sole proprietorship, use a				ate & ZIP Code	
		ate sheet and attach is petition.		Check the ap	propriate be	ox to describe your business:
				☐ Healtl	h Care Busi	iness (as defined in 11 U.S.C. § 101(27A))
				☐ Single	e Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
				☐ Stock	broker (as o	defined in 11 U.S.C. § 101(53A))
				☐ Comr	nodity Broke	er (as defined in 11 U.S.C. § 101(6))
				☐ None	of the abov	ve
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you mu		e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure				
		definition of small	■ No.	I am not filing	under Cha	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).		□ No.	I am filing und Code.	der Chapter	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
			☐ Yes.	I am filing und	der Chapter	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4:	Report if You Own or	Have Any	Hazardous Pro	perty or Ar	ny Property That Needs Immediate Attention
14.		ou own or have any	■ No.			
	allege of im	erty that poses or is ed to pose a threat minent and ifiable hazard to	☐ Yes.	_		
		c health or safety?				
	prope	you own any erty that needs diate attention?		If immediate attoneeded, why is		
	perist livest or a b	xample, do you own nable goods, or ock that must be fed, uilding that needs t repairs?		Where is the pro	operty?	
	u. gor					Number, Street, City, State & Zip Code

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Debtor 1 JAMES RO WING
Debtor 2 CHRISTINA LORINE DAWN WING

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 1 JAMES RO WING CHRISTINA LORIN	NE DAWI	N WING		Case number (if k	nown)	
Par	6: Answer These Questi	ons for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily busines money for a business or investmen				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe that	at are not consur	mer debts or business de	bts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			is excluded and administrative expenses	
	administrative expenses are paid that funds will		No				
	be available for						
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50,000	
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		50,001-100,000	
		☐ 100-1 ☐ 200-9		10,001-25,0	00	☐ More than100,000	
19.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 ·	- \$10 million	□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?	\$50,001 - \$100,000		□ \$10,000,001 - \$50 million		□ \$1,000,000,001 - \$10 billion	
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00	- \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you	\$0 - \$	50.000	□ \$1,000,001 ·	- \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?	□ \$50,000 - \$100,000		□ \$10,000,001 - \$50 million		□ \$1,000,000,001 - \$10 billion	
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00	⊢- \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
		— \$500,	00 1 - \$1 million				
Par							
For	you	I have ex	camined this petition, and I declare u	nder penalty of p	perjury that the informatio	on provided is true and correct.	
		ave chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, d States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				attorney to help me fill out this			
			d in this petition.				
I understand making a false statement, concealing property, or obtaining money or property by fraud in connect bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 1 and 3571.							
		/s/ JAM	ES RO WING		/s/ CHRISTINA LORING		
		_	RO WING e of Debtor 1		CHRISTINA LORINE Signature of Debtor 2	E DAWN WING	
		Executed			Executed on July 2, 2018		
			MM / DD / YYYY		MM / DE	D/YYYY	

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Debtor 1 JAMES RO WING CHRISTINA LOR	G INE DAWN WING	Cas	Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United S	tates Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, ce schedules filed with the petition is incorrect.	rtify that I have no know	rledge after an inquiry that the information in the			
	/s/ Timothy P. Post, Esq.	July 2, 2018				
	Signature of Attorney for Debtor		MM / DD / YYYY			
	Timothy P. Post, Esq.					
	Printed name					
	Law Offices of Timothy Post					
	Firm name					
	P.O. BOX 12313					
	Reno, NV 89510					
	Number, Street, City, State & ZIP Code					
	Contact phone (775) 322-7980	Email address	TimPostLaw@yahoo.com			
	995 NV					
	Bar number & State					

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Fill	in this information to identify your case:		
	otor 1 JAMES RO WING		
	First Name Middle Name Last Name		
	otor 2 CHRISTINA LORINE DAWN WING		
(Spc	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: DISTRICT OF NEVADA		
	se number	☐ Check	k if this is an
		amen	ded filing
Su Be a	ficial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Information as complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend regignal forms, you must fill out a new Summary and check the box at the top of this page.	or supplyir	
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	50,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,869.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	56,869.00
Par	t 2: Summarize Your Liabilities		
		Your li	abilities
			t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	7,500.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$	26,612.00
	Your total liabilities	\$	34,112.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,213.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,276.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other scl	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	<i>box</i> and s	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1	IAMES RO	WING
----------	----------	------

Debtor 2 CHRISTINA LORINE DAWN WING Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,493.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Boot A on Only data E/E consults following	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case 18-507	บ9-มเม	נ טטע	Entered 07/02/18 10.16	.52 Pa	ge 14 01	49
Fill in this infor	rmation to identify you	ır case and th	nis filing	j:			
Debtor 1	JAMES RO WIN	G					
	First Name	_	Name	Last Name			
Debtor 2	CHRISTINA LO						
(Spouse, if filing)	First Name	Middle	Name	Last Name			
United States B	ankruptcy Court for the	DISTRICT	OF NEV	/ADA			
Case number							☐ Check if this is ar amended filing
					l		amenaea ming
Official Fo	orm 106A/B						
Schedu	le A/B: Pro	perty					12/15
Answer every que		ng, Land, or Ot	her Real	Estate You Own or Have an Interest In			
1. Do you own or	have any legal or equita	ble interest in a	ny resid	ence, building, land, or similar property?			
☐ No. Go to Pa	art 2.						
Yes. Where	is the property?						
	1.1 4465 BOCA WAY SPACE NO. 68 Street address, if available, or other description		What	is the property? Check all that apply Single-family home Duplex or multi-unit building	the amount	of any secure	nims or exemptions. Put d claims on Schedule D: ns Secured by Property.
				Condominium or cooperative	Orealions VV	no riave olam	ns occured by 1 Topony.
				Manufactured or mobile home	Current val	ue of the	Current value of the
Reno		9502-0000		Land	entire prop	-	portion you own?
City	State	ZIP Code		Investment property Timeshare	\$5	0,000.00	\$50,000.00
				Other			our ownership interest ancy by the entireties, or
			Who	has an interest in the property? Check one	à life estate	e), if known.	, .,,
				Debtor 1 only	Fee simp	ole	
Washoe				Debtor 2 only			
County			-	Debtor 1 and Debtor 2 only			munity property
			Other	At least one of the debtors and another information you wish to add about this ite	,	tructions)	
				erty identification number:	iii, suoii us ioi	Jui	
				your entries from Part 1, including any r here		=>	\$50,000.00
Part 2: Describe	e Your Vehicles						

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

		AMES RO	WING LORINE DAWN W	/ING	Case i	number (if known)	
3. C	ars, vans,	trucks, trac	tors, sport utility ve	hicles, motorcycles			
П	No						
	Yes						
_	163						
3.1	Make: Model:	Honda CRV		Who has an interest in the property? Chec ☐ Debtor 1 only	ck one	the amount of any secu	claims or exemptions. Put red claims on Schedule D: aims Secured by Property.
	Year:	2003		Debtor 2 only			
	Approxin	nate mileage:	96000	■ Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
		ormation:		☐ At least one of the debtors and another		o proposity	,
				■ Check if this is community property (see instructions)		\$5,019.00	\$5,019.00
□ 5 A				n for all of your entries from Part 2, inc			\$5,019.00
Part	3: Descri	he Your Perso	nal and Household Ite	ems			
Do y	ou own o	or have any l	egal or equitable in	terest in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
Е		goods and f Major appliar	urnishings nces, furniture, linens	, china, kitchenware			
	Yes. De	scribe					
			Furniture and A	ppliancess			\$1,000.00
						<u> </u>	
E		Televisions a including cell		eo, stereo, and digital equipment; compute nedia players, games	ers, printers, s	canners; music collec	tions; electronic devices
E	No	Antiques and other collecti	figurines; paintings, ons, memorabilia, co	prints, or other artwork; books, pictures, o llectibles	or other art obj	ects; stamp, coin, or b	aseball card collections;
L	Yes. De	scribe					
E	xamples:	for sports a Sports, photo musical instr	graphic, exercise, ar	nd other hobby equipment; bicycles, pool t	tables, golf clu	bs, skis; canoes and k	sayaks; carpentry tools;
_	No Yes. De	scribe					
10. F	irearms		s. shotguns, ammuni	tion, and related equipment			
	No		. 0: -,				
	Yes. De	scribe					

Debtor 1 Debtor 2	JAMES RO CHRISTINA	WING LORINE DAWN WING		Case number (if known)	
□ No		lothes, furs, leather coats, des	igner wear, shoes, accessories		
		Clothing			\$500.00
☐ No		ewelry, costume jewelry, engaç	gement rings, wedding rings, he	eirloom jewelry, watches, gems, ç	gold, silver
		Wedding Rings			\$150.00
Exam ■ No □ Yes 14. Any o ■ No	arm animals aples: Dogs, cats, Describe ther personal ar Give specific in	nd household items you did	not already list, including any	/ health aids you did not list	
			art 3, including any entries fo		\$1,650.00
	escribe Your Finar wn or have any	ncial Assets legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		have in your wallet, in your ho	·	on hand when you file your petiti	on
Exam			ounts; certificates of deposit; she with the same institution, list ea Institution name:	ares in credit unions, brokerage I ach.	nouses, and other similar
			Divokind		¢200.00
		17.1. Checking	Bluebird		\$200.00
Exam ■ No		or publicly traded stocks s, investment accounts with bro	okerage firms, money market ad	ccounts	
	oublicly traded s venture	tock and interests in incorpo	orated and unincorporated bu	usinesses, including an interes	t in an LLC, partnership, and
☐ Yes	. Give specific in	formation about them Name of entity:		% of ownership:	
Nego	tiable instrument	s include personal checks, cas	tiable and non-negotiable insthers' checks, promissory notes	s, and money orders.	

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	ebtor 1 ebtor 2	JAMES RO W CHRISTINA L	ING ORINE DAWN WING		Case number (if known)	
	Retiren	nent or pension a	mation about them Issuer name: accounts A, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other p	ension or profit-sharing plan	s
	■ No □ Yes.	List each account	separately. Type of account:	Institution name:		
22.	Your s		repayments deposits you have made so that y with landlords, prepaid rent, public			or others
				Institution name or individual:		
23.		ies (A contract for	a periodic payment of money to yo	ou, either for life or for a number o	f years)	
	■ No □ Yes	lssu	uer name and description.			
24.			n IRA, in an account in a qualifie 29A(b), and 529(b)(1).	d ABLE program, or under a qu	alified state tuition progra	n.
	☐ Yes	Inst	itution name and description. Sepa	arately file the records of any inter	rests.11 U.S.C. § 521(c):	
	■ No		re interests in property (other the mation about them	nan anything listed in line 1), an	d rights or powers exercis	able for your benefit
	Examp ■ No	oles: Internet doma	demarks, trade secrets, and other in names, websites, proceeds from the mation about them		ents	
	Examp ■ No	oles: Building perm	nd other general intangibles its, exclusive licenses, cooperative rmation about them	e association holdings, liquor licen	nses, professional licenses	
M	oney or	property owed to	you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to you	u mation about them, including whet	her you already filed the returns a	nd the tax years	
	— 100.	Cive opcome imon	mation about thom, morating whot	nor you already filed the folding a	nd the tax years	
	Examp ■ No	support les: Past due or lu Give specific infor	ump sum alimony, spousal support	, child support, maintenance, divo	orce settlement, property sett	lement
	Examp ■ No		s, disability insurance payments, d aid loans you made to someone el		on pay, workers' compensati	on, Social Security

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	Odde 10 00100 btb Doo'l Entered 0	1702/10 10:10:02 1 age 1	.0 01 40
Debtor Debtor		Case number (if known)	
_Ex	erests in insurance policies camples: Health, disability, or life insurance; health savings account (HSA);	credit, homeowner's, or renter's insura	nce
■ N	No 'es. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If y so	y interest in property that is due you from someone who has died you are the beneficiary of a living trust, expect proceeds from a life insurance meone has died. No Yes. Give specific information	ce policy, or are currently entitled to rec	eive property because
Ex ■ N	aims against third parties, whether or not you have filed a lawsuit or maxamples: Accidents, employment disputes, insurance claims, or rights to su No		
	ner contingent and unliquidated claims of every nature, including cou No Yes. Describe each claim	interclaims of the debtor and rights to	o set off claims
	y financial assets you did not already list No Yes. Give specific information		
	dd the dollar value of all of your entries from Part 4, including any ent or Part 4. Write that number here		\$200.00
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In. List	t any real estate in Part 1.	
■ No	you own or have any legal or equitable interest in any business-related property b. Go to Part 6. es. Go to line 38.	y?	
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own or Half you own or have an interest in farmland, list it in Part 1.	ave an Interest In.	
	you own or have any legal or equitable interest in any farm- or comm No. Go to Part 7. Yes. Go to line 47.	nercial fishing-related property?	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not L	List Above	
Ex ■ N	you have other property of any kind you did not already list? kamples: Season tickets, country club membership No Yes. Give specific information		
	dd the dollar value of all of your entries from Part 7. Write that numbe	er here	\$0.00

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JAMES RO WING Debtor 1 Debtor 2 **CHRISTINA LORINE DAWN WING** Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$50,000.00 Part 2: Total vehicles, line 5 \$5,019.00 57. Part 3: Total personal and household items, line 15 \$1,650.00 58. Part 4: Total financial assets, line 36 \$200.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 60. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$6,869.00 Copy personal property total \$6,869.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$56,869.00

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Fill in this information to identify your case: Debtor 1							
ES RO WING							
ame	Middle Name	Last Name					
ISTINA LORIN	IE DAWN WING						
ame	Middle Name	Last Name					
Court for the:	DISTRICT OF NEVADA						
Case number			ι	☐ Check if this is an amended filing			
	ame	ame Middle Name RISTINA LORINE DAWN WING ame Middle Name	ame Middle Name Last Name EISTINA LORINE DAWN WING ame Middle Name Last Name	ame Middle Name Last Name EISTINA LORINE DAWN WING ame Middle Name Last Name			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
4465 BOCA WAY SPACE NO. 68 Reno, NV 89502 Washoe County	\$50,000.00		\$50,000.00	Nev. Rev. Stat. §§ 21.090(1)(I) and 115.050
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	4.14 1.16.666
2003 Honda CRV 96000 miles Line from Schedule A/B: 3.1	\$5,019.00		\$0.00	Nev. Rev. Stat. § 21.090(1)(f)
Ellie II olii ochedale PVD. G.1			100% of fair market value, up to any applicable statutory limit	
Furniture and Appliancess Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	Nev. Rev. Stat. § 21.090(1)(b)
Ellie II olii ochedale PVD. G. 1			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	Nev. Rev. Stat. § 21.090(1)(b)
Line IIIII Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Wedding Rings Line from Schedule A/B: 12.1	\$150.00		\$150.00	Nev. Rev. Stat. § 21.090(1)(a)
LINE HOTH SCHEUUIE AVD. 12.1			100% of fair market value, up to any applicable statutory limit	

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	btor 1 btor 2	JAMES RO WING CHRISTINA LORINE DAWN WING	3		Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
		cking: Bluebird rom Schedule A/B: 17.1	\$200.00		\$200.00	Nev. Rev. Stat. § 21.090(1)(z)
	Lille	Totil Scredule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
3.	(Subj	ou claiming a homestead exemption of ect to adjustment on 4/01/19 and every 3			led on or after the date of adjustme	nt.)
		Yes. Did you acquire the property covere \square No	ed by the exemption w	ithin 1	,215 days before you filed this case	?
		- No				

	Case 18-50	0709-btb Doc 1 Entered	a 07/02/1	18 10:16:52	Page 22 of 49	
Fill in this in	formation to identify ye	our case:				
Debtor 1	JAMES RO WI	NG				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	CHRISTINA LO	DRINE DAWN WING Middle Name	Last Name			
			Last Name			
United States	s Bankruptcy Court for th	e: DISTRICT OF NEVADA				
Case numbe	r					
(if known)					_	c if this is an
					amen	ded filing
Official F	orm 106D					
		s Who Have Claims S	ecured	by Property	V	12/15
is needed, cop	y the Additional Page, fill	e. If two married people are filing together it out, number the entries, and attach it to				
number (if kno	•					
	itors have claims secured		ala a dada a Mar			
_		t this form to the court with your other so	chedules. You	u have nothing else t	o report on this form.	
■ Yes. F	Fill in all of the informatio	n below.				
Part 1: Li	st All Secured Claims					
		s more than one secured claim, list the credit		Column A	Column B	Column C
		as a particular claim, list the other creditors in etical order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	•	ű		value of collateral.	claim	if any
2.1 United Union	I Federal Credit	Describe the property that secures the	e claim:	\$7,500.00	\$5,019.00	\$2,481.00
Creditor's	Name	2003 Honda CRV 96000 miles				
2207 9	S. State St.	As of the date you file, the claim is: Ch	neck all that			
	Joseph, MI 49085	apply. Contingent				
	Street, City, State & Zip Code					
Number, v	Street, Oity, State & Zip Code	☐ Unliquidated				
Who owes th	e debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 or		☐ An agreement you made (such as mo	ortaga ar agai	ura d		
Debtor 2 or	•	car loan)	origage or secu	irea		
_	nd Debtor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
_	e of the debtors and another	_				
_	nis claim relates to a	_	Car Loan			
communi						
Date debt was	s incurred 2017	Last 4 digits of account numbe	er <u>5212</u>			
Add the doll	ar value of your entries in	Column A on this page. Write that number	er here:	\$7,50	0.00	
	last page of your form, adumber here:	d the dollar value totals from all pages.		\$7,50		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

		Case 18-5070	ש-טנט ט	00.1	Ente	ereu o <i>rr</i> c	JZ/1	10.10	0.52	Page	23 0	11 49	
Fill in	this informat	tion to identify your	case:										
Debtor	r 1	JAMES RO WING											
Deptoi	_	First Name	Middle Na	ame		Last Name	e			_			
Debtor	r 2	CHRISTINA LORII	NE DAWN W	/ING									
(Spouse	if, filing)	First Name	Middle Na			Last Name	е			_			
United	States Bankr	ruptcy Court for the:	DISTRICT C	F NEVA	DA					_			
Case r	number												
(if known				_								Check if this is an	
												amended filing	
Offici	ial Form	106F/F											
		: Creditors W	ho Have	Unsed	curec	d Claims	S					12/15	
								rt 2 for crod	itore with	h NONDD	IODITY 6	laims. List the other pa	rtv tc
left. Atta	ach the Contine nd case numbe	uation Page to this pag	e. If you have n	o informa								entries in the boxes on Iditional pages, write yo	
1. Do		have priority unsecure											
	No. Go to Part	2.	J	•									
_	Yes.												
Part 2:		f Your NONPRIORIT	Y Unsecured	Claims									
		have nonpriority unsec			?								
_	•	nothing to report in this pa	_			th your other s	schodi	ulos					
		lottiling to report in this pa	art. Submit triis i	om to me	Court wit	iii youi oiilei s	scrieuc	uies.					
	Yes.												
uns tha	secured claim, li		for each claim.	For each of	claim liste	ed, identify wh	nat typ	e of claim it i	is. Do not	t list claims	already	than one nonpriority included in Part 1. If mor the Continuation Page of	
												Total claim	
4.1	Aaron Sal	es and Lease		Last 4 dig	gits of ac	ccount numb	er	F995				\$4,247	.00
	Nonpriority Cr	reditor's Name		When was	s the del	bt incurred?	_						
		v, GA 30144					_						
	Number Stree	et City State ZIp Code	_	As of the	date you	u file, the clai	im is:	Check all th	at apply				
	_	d the debt? Check one.											
	Debtor 1 c	•		☐ Contin	gent								
	Debtor 2 c	only		☐ Unliqui	idated								
	Debtor 1 a	and Debtor 2 only		☐ Dispute									
	☐ At least or	ne of the debtors and and	other	Type of N	IONPRIO	ORITY unsecu	ured c	claim:					
	Check if t	his claim is for a comr	nunity	☐ Studer	nt loans								
	debt					sing out of a se	epara	tion agreeme	ent or div	orce that y	ou did no	ot	
	_	subject to offset?		report as p									
	No			■ Debts	to pension	on or profit-sha	aring p	plans, and of	ther simila	ar debts			
	☐ Yes			Other	Specify	Lease							

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1.2	AD ASTRA REC	Last 4 digits of account number 4735	\$512.00			
	Nonpriority Creditor's Name 3611 N. Ridge R104 Wichita, KS 67205	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collections				
4.3	Capital One	Last 4 digits of account number 0000	\$565.00			
	Nonpriority Creditor's Name POB 30285	When was the debt incurred?				
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	The state year me, and stating of shoots an area apply				
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	■ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes					
	in res	Other. Specify Charge Off				
4.4	Collection Service of Nevada Nonpriority Creditor's Name	Last 4 digits of account number 8214	\$545.00			
	777 Forest St. Reno, NV 89509	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Lawsuit				

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2 CHRISTINA LORINE DAWN WING		
Credit One Bank	Last 4 digits of account number 0000	\$568.00
Nonpriority Creditor's Name POB 98873	When was the debt incurred?	
Las Vegas, NV 89193		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
■ Check if this claim is for a community debt		
ດeກະ Is the claim subject to offset?	DObligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card purchases	
Jefferson Capital systems	Last 4 digits of account number 3346	\$456.00
Nonpriority Creditor's Name		Ψ-30.00
16 McLeland Rd.	When was the debt incurred?	
Saint Cloud, MN 56303	-	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
⊒ Yes	■ Other. Specify Collections	
Kings Credit Service	Last 4 digits of account number 3270	\$495.00
Nonpriority Creditor's Name 510 North Douty Street RE: Community Med. Center	When was the debt incurred?	
Hanford, CA 93230	_	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Student loans	
Check if this claim is for a community debt		
Is the claim subject to offset?	DObligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collections	

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	or 2 CHRISTINA LORINE DAWN WING	Case number (if know)	
4.8	LVNV Funding, LLC	Last 4 digits of account number 0000	\$568.00
	Nonpriority Creditor's Name POB 10497 Greenville, SC 29603	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collections	
4.9	Midland Credit Management	Last 4 digits of account number 0000	\$1,246.00
	Nonpriority Creditor's Name POB 939019	When was the debt incurred?	
	San Diego, CA 92193 Number Street City State Zlp Code	As of the data you file the claim is Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	_	
	☐ Debtor 2 only	Contingent	
		☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.1 0	Nevada West Financial	Last 4 digits of account number	\$11,549.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	<u></u>	Student loans	
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		

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Outsource Receivables Management	Last 4 digits of account number 6151	\$309.00
Nonpriority Creditor's Name 372 24th St. Suite 300 Re: Umpqua Bank	When was the debt incurred?	
Ogden, UT 84401 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only		
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collections	
Paycheck Advance	Last 4 digits of account number 4977	\$500.00
Nonpriority Creditor's Name 75B West Plumb Lane	When was the debt incurred?	
Reno, NV 89509 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	Поли	
☐ Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Lawsuit	
Prefered Credit	Last 4 digits of account number 1560	\$2,530.00
Nonpriority Creditor's Name POB 1679	When was the debt incurred?	·
Saint Cloud, MN 56302 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	one of the same of	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ _{No}	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Loan	

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	or 2 CHRISTINA LORINE DAWN WING	Case number (if know)			
4.1 4	Rapid Cash	Last 4 digits of account number 0000	\$512.00		
	Nonpriority Creditor's Name 690 E. Prater Way	When was the debt incurred?			
	Sparks, NV 89431 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one. ☐ Debtor 1 only				
	Debtor 2 only	☐ Contingent			
	<u> </u>	Unliquidated			
	■ Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Collections			
4.1 5	Simple Rto LLC	Last 4 digits of account number 2016	\$954.00		
	Nonpriority Creditor's Name 1225 E Fort Union Blvd Sute 300 Midvale, UT 84047	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Loan			
4.1	Social Security Administration	Last 4 digits of account number 0000	\$600.00		
6	Nonpriority Creditor's Name 5107 Leesburg Pike	When was the debt incurred?	4000.00		
	Falls Church, VA 22041	When was the debt incurred:			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Overpayment			
		· ·			

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Debtor 2 CHRISTINA LORINE I	DAWN WING Case number (if know)					
Verizon Wireless	Last 4 digits of account number 0000	\$456.00				
Nonpriority Creditor's Name POB 26055	When was the debt incurred?					
Minneapolis, MN 55426 Number Street City State ZIp Co Who incurred the debt? Check	ode As of the date you file, the claim is: Check all that apply					
☐ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	_ `	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:				
■ Debtor 1 and Debtor 2 only	'					
\square At least one of the debtors ar	·					
Check if this claim is for a debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not					
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	\square Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Phone Service					
Part 3: List Others to Be Notifie	ed About a Debt That You Already Listed					
is trying to collect from you for a deb	s to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if bt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have addition, do not fill out or submit this page.	e. Similarly, if you				
Part 4: Add the Amounts for Ea	ach Type of Unsecured Claim					
Total the amounts of certain types of type of unsecured claim.	of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the	amounts for each				
	Total Claim					

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	•		0.1		Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	26,612.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	26,612.00

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Fill in this infor	mation to identify your	case:			
Debtor 1	JAMES RO WING	i			
	First Name	Middle Name	Last Name	-	
Debtor 2	CHRISTINA LORI	NE DAWN WING			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA			
Case number (if known)					☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3			<u> </u>		
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	- ity		Oldio	211 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	

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					9
Fill in this i	nformation to identify your	case:			
Debtor 1	JAMES RO WING	i			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	CHRISTINA LORI	NE DAWN WING Middle Name	Last Name		
	es Bankruptcy Court for the:	DISTRICT OF NEVADA	Last Hamo		
Officed State	es Bankruptcy Court for the.	DIOTRIOT OF NEVADA			
Case number (if known)	er				☐ Check if this is an amended filing
Official	Form 106H				
	ule H: Your Cod	ohtors			12/15
Scrieut	ule II. Toul Cou	EDIOIS			12/15
fill it out, an your name a	d number the entries in the and case number (if known)	boxes on the left. Attach . Answer every question.	the Additional Page to	this page. On the to	eeded, copy the Additional Page, o of any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case, d	o not list either spouse a	as a codebtor.	
■ No □ Yes					
Arizona —	, California, Idaho, Louisiana				y states and territories include
	Go to line 3. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line 2 Form 1	2 again as a codebtor only i	f that person is a guarante	or or cosigner. Make s	ure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	column 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1 N	ame			□ Schedule D, lin □ Schedule E/F, I □ Schedule G, lin	ine
	umber Street			-	
C	ity	State	ZIP Code		
3.2				☐ Schedule D, lin	Δ
	ame			_ ☐ Schedule E/F, I	
				☐ Schedule G, lin	e
	umber Street			_	
С	ity	State	ZIP Code		

Fill in this informa	ation to identify your case:	
Debtor 1	JAMES RO WING	
Debtor 2 (Spouse, if filing)	CHRISTINA LORINE DAWN WING	
United States Bar	nkruptcy Court for the: DISTRICT OF NEVADA	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Fo	orm 106 <u>l</u>	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	11: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job,	Emmlerment status	■ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
	employers.	Occupation	Finisher	Unemployed
	Include part-time, seasonal, or self-employed work.	Employer's name	MS Carita Safe Truck Inc	
	Occupation may include student or homemaker, if it applies.	Employer's address	2815 W. Highway 40 Verdi, NV 89439	
		How long employed the	nere? 2 years	

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

			non-fill	ing spouse
2.	\$	2,493.00	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	2,493.00	\$	0.00

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

Deb Deb	tor 1 tor 2	JAMES RO WING CHRISTINA LORINE DAWN WING	=	Ca	se number (if kr	nown)				
				F	or Debtor 1			or Debtor		
	Cop	by line 4 here	4.	\$	2,493	3.00	\$. . .	0.00	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	280	0.00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$		0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$		0.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$		0.00	\$		0.00	
	5e.	Insurance	5e.	\$		0.00	\$		0.00	
	5f.	Domestic support obligations	5f.	\$		0.00	\$		0.00	
	5g.	Union dues	5g.	\$		0.00	\$		0.00	
	5h.	Other deductions. Specify:	5h	+ \$		0.00	+ \$_		0.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	280	0.00	\$_		0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,213	3.00	\$		0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.	\$		0.00	\$		0.00	
	8b.	Interest and dividends	8b.	\$		0.00	. \$_		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$		0.00	\$_		0.00	
	8d.	Unemployment compensation	8d.	\$		0.00	\$		0.00	
	8e.	Social Security	8e.	\$		0.00	\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	C	0.00	\$		0.00	
	8g.	Pension or retirement income	8g.	\$		0.00	\$		0.00	
	8h.	Other monthly income. Specify:	8h	+ \$		00.0	+ \$		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	C	0.00	\$_		0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,213.00	+ \$		0.00	= \$	2,213.00
11.	Incluothe Do r	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	deper				•	Schedul	e <i>J</i> . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reserved that amount on the Summary of Schedules and Statistical Summary of Certailies							\$	2,213.00
10	De l	you expect on increase or decrease within the core of the core file (1).	2						Combin monthly	ed income
13.	■ Too	you expect an increase or decrease within the year after you file this form No.	ſ							
		Yes. Explain:								

Official Form 106I Schedule I: Your Income page 2

Sill	in this informa	ation to identify yo	our case:			I							
	otor 1					Cho	ok if this is:						
Dep	ntor r	JAMES RO V	WING		Check if this is:								
Debtor 2 (Spouse, if filing) CHRISTINA LORINE DAWN WING							A supplement showing postpetition chapter 13 expenses as of the following date:						
United States Bankruptcy Court for the: DISTRICT OF NEVADA							MM / DD / YYYY						
	e numbe r nown)												
Of	fficial Fo	rm 106J											
S	chedule	J: Your	Exper	ises				12/1					
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.									
Par		ribe Your House	∍hold										
1.	Is this a joir ☐ No. Go to												
		o line ∠. es Debtor 2 live i	in a sonar	ate household?									
	= 103. B00		iii a sepai	ate nousenoid:									
	,		st file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of Deb	tor 2.						
2.	Do you have	e dependents?	■ No										
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?					
	Do not state	the						□ No					
	dependents	names.						☐ Yes					
								□ No □ Yes					
								□ No					
							_	Yes					
								□ No □ Yes					
3.	Do your exp	oenses include	_	No			_	□ res					
		f people other to d your depende	:han 👝	Yes									
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses									
exp				uptcy filing date unless y y is filed. If this is a supp									
the		h assistance an		government assistance it luded it on Schedule I: Y			Your exp	enses					
•		,											
4.		or home owners and any rent for the		ses for your residence. In r lot.	nclude first mortgag	e 4. \$	S	560.00					
	If not includ	ded in line 4:											
	4a. Real e	estate taxes				4a. \$	S	0.00					
	•	erty, homeowner's				4b. \$		0.00					
		e maintenance, re eowner's associat		ıpkeep expenses dominium dues		4c. 9 4d. 9		0.00					
5.				our residence, such as ho	me equity loans	5. 9		0.00					

150.00 0.00 100.00 0.00 600.00 0.00 200.00 120.00 0.00
0.00 100.00 0.00 600.00 0.00 200.00 120.00
0.00 100.00 0.00 600.00 0.00 200.00 120.00
100.00 0.00 600.00 0.00 200.00 120.00
0.00 600.00 0.00 200.00 120.00
600.00 0.00 200.00 120.00
0.00 200.00 120.00
200.00 120.00
120.00
0.00
0.00
200.00
50.00
0.00
0.00
0.00
100.00
0.00
0.00
196.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
0.00
2,276.00
2,276.00
2,213.00
2,276.00
-63.00
rease or decrease because of a

Fill in th	nis informa	ation to identify your	case:					
Debtor 1	1	JAMES RO WING						
Dobtor	•	First Name	Middle Name	Las	t Name			
Debtor 2	2	CHRISTINA LORI	NE DAWN WING					
(Spouse if,	filing)	First Name	Middle Name	Las	t Name			
United S	States Bank	kruptcy Court for the:	DISTRICT OF NEVADA					
Case nu (if known)	ımber							Check if this is an amended filing
		106Dec	n Individual	Dobt	or's Sahadı	ulos		
Deci	iarati	on About a	<u>ın Individual</u>	Depti	or s acheur	uies_		12/15
years, or	Sign I	U.S.C. §§ 152, 1341, 1 Below	519, and 3571.				•	·
Dic	d you pay o	or agree to pay some	one who is NOT an attorn	ney to help	you fill out bankrupto	cy forms?		
	No							
	Yes. Na	me of person						tition Preparer's Notice, ature (Official Form 119)
		of perjury, I declare true and correct.	that I have read the sumn	mary and s	chedules filed with th	is declarati	on and	
х	/s/ JAME	S RO WING		Х	/s/ CHRISTINA LO	RINE DAW	/N WING	
-		RO WING			CHRISTINA LORIN			
	Signature	of Debtor 1			Signature of Debtor 2			
	Date Ju	ly 2, 2018			Date July 2, 2018	3		

Fill	n this infor	mation to identify your	case:			
Deb	tor 1	JAMES RO WING		Lost Nome		
Deb	tor 2		Middle Name INE DAWN WING	Last Name		
	ise if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA			
Case (if kno	e number own)				_	Check if this is an mended filing
Sta Be as	temens s complete mation. If i	and accurate as possi	attach a separate sheet to t	re filing together, both are	ankruptcy equally responsible for sup v additional pages, write you	
		, , , , ,	rital Status and Where You	Lived Before		
1.	What is you	ır current marital statu	s?			
	■ Married					
2.	During the	last 3 years, have you	lived anywhere other than v	where you live now?		
	■ No □ Yes. Li	st all of the places you li	ved in the last 3 years. Do no	ot include where you live now		
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	☐ Yes. M	ake sure you fill out Sch	edule H: Your Codebtors (Of	ficial Form 106H).		
Part	2 Expla	in the Sources of You	r Income			
	Fill in the to	al amount of income you	nployment or from operating u received from all jobs and a have income that you receive	Ill businesses, including part-		ndar years?
	□ No ■ Yes. F	II in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,278.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

	tor 1 otor 2	_	MES RO V RISTINA I	VING Lorine d <i>a</i>	WN WING	3		(Case	number (if known)		
					Debtor 1					Debtor 2		
						of income that apply.	(be	oss income fore deductions an clusions)	ıd	Sources of inco		Gross income (before deductions and exclusions)
			dar year: December :	31, 2017)	■ Wages bonuses,	s, commissions, tips		\$30,509.0	00	☐ Wages, components, tips	missions,	\$0.00
					☐ Opera	ting a business				☐ Operating a b	ousiness	
			lar year bef December :		■ Wages bonuses,	s, commissions, tips		\$0.0	00	☐ Wages, comi bonuses, tips	missions,	\$0.00
					☐ Opera	ting a business				☐ Operating a b	ousiness	
		each s	,	he gross inco	,	•	,	ceived together, list		,		
					Debtor 1					Debtor 2		
						of income below.	eac (be	oss income from ch source fore deductions an clusions)	nd	Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
Par	t 3:	List	Certain Pa	yments You	Made Befo	ore You Filed for	Bankr	uptcy				
6.	_	No.	Neither Deindividual puring the No. Yes	ebtor 1 nor Deprimarily for a 90 days befor Go to line 7 List below 6 paid that cr not include to adjustment or Debtor 2 o	personal, for you filed to be a creditor. Do no payments to on 4/01/19	amily, or househo for bankruptcy, di or to whom you pai not include paymer o an attorney for the and every 3 year e primarily consu	Imer cold purp id you id a total id a total	pay any creditor a standard of \$6,425* or modomestic support of hkruptcy case.	total ore in obliga	of \$6,425* or mor one or more payi tions, such as chi r after the date of	e? ments and ti ild support a	1(8) as "incurred by an the total amount you and alimony. Also, do
			■ No.	Go to line 7								
			□ Yes		ments for d	omestic support o		al of \$600 or more ons, such as child s				t creditor. Do not nclude payments to an
	Cre	ditor's	s Name and	l Address		Dates of payme	ent	Total amount		Amount you still owe	Was this p	payment for

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Debtor 1 Debtor 2 Debtor 2 Debtor 2				Cas	se number (if known)	
7.	Inside of wh	n 1 year before you filed for bankrupters include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners; relatives of any gen control, or owner of 20% o	eral partners; partners of their voting	erships of which y g securities; and a	ou are a genera any managing a	al partner; corporations agent, including one for
	_	No Yes. List all payments to an insider.					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	insid	n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos		ments or transfer a	any property on a	account of a d	ebt that benefited an
	`	No Yes. List all payments to an insider					
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Pai	rt 4:	Identify Legal Actions, Repossession	ns, and Foreclosures	para			
9.	List a modif	n 1 year before you filed for bankrupte Il such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details.	cy, were you a party in an cases, small claims actions	y lawsuit, court ac s, divorces, collection	tion, or administ on suits, paternity	trative proceed actions, suppor	ling? t or custody
		e title e number	Nature of the case	Court or agency		Status of th	ne case
10.		n 1 year before you filed for bankrupt k all that apply and fill in the details below		erty repossessed, f	oreclosed, garni	shed, attache	d, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.					
	Cred	litor Name and Address	Describe the Property		Date	•	Value of the property
11	Withi	n 90 days before you filed for bankrup	Explain what happened		nancial institutio	n, set off any a	amounts from your
	acco	unts or refuse to make a payment bec No Yes. Fill in the details.		3		, , , , , , ,	
	Cred	litor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
12.	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a No Yes		erty in the possess	ion of an assign	ee for the ben	efit of creditors, a
Pai	rt 5:	List Certain Gifts and Contributions					
13.	= 1	n 2 years before you filed for bankrup	otcy, did you give any gifts	s with a total value	of more than \$6	00 per person	?
	Gifts	Yes. Fill in the details for each gift. s with a total value of more than \$600 person	Describe the gifts			es you gave gifts	Value
		on to Whom You Gave the Gift and ress:					

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Debt Debt		JAMES RO WING CHRISTINA LORINE DAWN W	/ING		Cas	se number (if known)	
ı	1	n 2 years before you filed for bank No Yes. Fill in the details for each gift or o			tions v	with a total	value of more than	\$600 to any charity?
	Gifts more Char	s or contributions to charities that e than \$600 rity's Name ress (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	I		Dates you contributed	Value
Part	6:	List Certain Losses						
		n 1 year before you filed for bankru mbling?	uptcy or	since you filed for bankruptcy, d	lid you	lose anyth	ning because of the	ft, fire, other disaster,
ı	1	No						
[ן ר	Yes. Fill in the details.						
		cribe the property you lost and the loss occurred	Include	ibe any insurance coverage for the amount that insurance has paince claims on line 33 of Schedule A	id. List	pending	Date of your loss	Value of property lost
Part	7:	List Certain Payments or Transfer	s					
(consi	n 1 year before you filed for bankruulted about seeking bankruptcy or de any attorneys, bankruptcy petition p	prepari	ng a bankruptcy petition?				erty to anyone you
		Yes. Fill in the details.						
	Addı Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not \	You	Description and value of any p transferred	ropert	У	Date payment or transfer was made	Amount of payment
	P.O. Ren	Offices of Timothy Post BOX 12313 o, NV 89510 PostLaw@yahoo.com		Attorney Fees			07/02/2018	\$665.00
F	orom Do no	n 1 year before you filed for bankru ised to help you deal with your cre of include any payment or transfer tha No Yes, Fill in the details.	ditors o	or to make payments to your cred			r transfer any prope	erty to anyone who
		on Who Was Paid		Description and value of any p	ropert	v	Date payment	Amount of
	Addı			transferred	торогі	,	or transfer was made	payment
t I	rans nclud nclud	n 2 years before you filed for banking ferred in the ordinary course of you de both outright transfers and transfer le gifts and transfers that you have all No	ur busir s made	ness or financial affairs? as security (such as the granting of				
[□ \	Yes. Fill in the details.						
	Pers Addı	on Who Received Transfer ress		Description and value of property transferred			iny property or received or debts change	Date transfer was made
	Pers	on's relationship to you					_	

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Deb	btor 2 CHRISTINA LORINE DAWN WI	NG			Case num	nber (if known)		
19.	Within 10 years before you filed for bankr beneficiary? (These are often called asset-			y property to a	self-settle	ed trust or similar device	∍ of wh	nich you are a
	☐ Yes. Fill in the details.							
	Name of trust	Descr	iption and v	alue of the pro	perty trans	sferred	Dat ma	te Transfer wa de
Par	rt 8: List of Certain Financial Accounts,	Instruments, S	afe Deposi	t Boxes, and St	torage Unit	ts		
20.	sold, moved, or transferred? Include checking, savings, money market houses, pension funds, cooperatives, ass No	, or other final	ncial accou	nts; certificates	s of deposi	•	-	
	Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digit		Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	be	Last balanc efore closing c transfe
21.	Do you now have, or did you have within cash, or other valuables? No Yes. Fill in the details.	1 year before y	ou filed for	bankruptcy, a	ny safe de	posit box or other depo	sitory	for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Addre	else had acc SS (Number, S d ZIP Code)		Describe	the contents		Do you still nave it?
22.	Have you stored property in a storage uni No Yes. Fill in the details.	it or place othe	er than your	home within 1	year befo	re you filed for bankrup	tcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it? Addre	else has or h SS (Number, S d ZIP Code)		Describe	the contents		Do you still nave it?
Par	rt 9: Identify Property You Hold or Contr	ol for Someon	e Else					
23.	Do you hold or control any property that for someone.	someone else	owns? Incl	ude any proper	ty you bor	rowed from, are storing	for, o	r hold in trust
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)		e is the prop r, Street, City, S		Describe	the property		Valu
Par	rt 10: Give Details About Environmental I	nformation						
For	the purpose of Part 10, the following defin	itions apply:						
	Environmental law means any federal, statoxic substances, wastes, or material into regulations controlling the cleanup of the	the air, land,	soil, surfac	e water, ground	• .			

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1 JAMES RO WING

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

to own, operate, or utilize it, including disposal sites.

hazardous material, pollutant, contaminant, or similar term.

	btor 1 btor 2		G	Cas	e number (if known)	
24.	Has	any governmental unit notified you tha	t you may be liable or potentially liable	unde	er or in violation of an environm	ental law?
		No Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of	any release of hazardous material?			
		No Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or adr	ministrative proceeding under any envir	ronm	nental law? Include settlements	and orders.
		No Yes. Fill in the details.				
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	ure of the case	Status of the case
Pa	rt 11:	Give Details About Your Business or	Connections to Any Business			
27.	With	nin 4 years before you filed for bankrupt	tcy, did you own a business or have any	y of t	the following connections to an	y business?
		☐ A sole proprietor or self-employed i	in a trade, profession, or other activity, o	eithe	er full-time or part-time	
		☐ A member of a limited liability comp	oany (LLC) or limited liability partnershi	p (Ll	LP)	
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	ecutive of a corporation			
		☐ An owner of at least 5% of the votin	g or equity securities of a corporation			
		No. None of the above applies. Go to I	Part 12.			
		Yes. Check all that apply above and fill	I in the details below for each business.			
	Ad	siness Name dress	Describe the nature of the business		Employer Identification number Do not include Social Security	
	/Nin	mbor Stroot City State and ZID Code)	Name of accountant or bookings			

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Dates business existed

No

☐ Yes. Fill in the details below.

Name Address

(Number, Street, City, State and ZIP Code)

Date Issued

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Debtor 1	JAMES RO WING			
Debtor 2	CHRISTINA LORINE DAWN WING		Case number (if known	n)
Part 12:	Sign Below			
are true a	d the answers on this <i>Statement of Financial</i> nd correct. I understand that making a false sokruptcy case can result in fines up to \$250,0 §§ 152, 1341, 1519, and 3571.	statement,	concealing property, or obtaining money	
/s/ JAME	ES RO WING	/s/ CH	RISTINA LORINE DAWN WING	
JAMES	RO WING	CHRIS	STINA LORINE DAWN WING	-
Signature	e of Debtor 1	Signat	ure of Debtor 2	
Date J	uly 2, 2018	Date	July 2, 2018	_
Did you a	ttach additional pages to Your Statement of I	inancial A	Affairs for Individuals Filing for Bankruptcy	/(Official Form 107)?
■ No				
☐ Yes				
Did you p	ay or agree to pay someone who is not an att	orney to h	elp you fill out bankruptcy forms?	
■ No				
☐ Yes. Na	ame of Person Attach the Bankruptcy Pe	etition Prep	arer's Notice, Declaration, and Signature (Off	iicial Form 119).

Fill in this inform	ation to identify your case:		1
Debtor 1	JAMES RO WING First Name Middle Name	Last Name	
Debtor 2	CHRISTINA LORINE DAWN WING		
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Ban	kruptcy Court for the: DISTRICT OF N	EVADA	
Case number			
(if known)			☐ Check if this is an
			amended filing
		viduals Filing Under Chapt	er 7 12/15
	claims secured by your property, or		
you have lease You must file this	od personal property and the lease has form with the court within 30 days afte er is earlier, unless the court extends the	not expired. r you file your bankruptcy petition or by the date s he time for cause. You must also send copies to t	
	ople are filing together in a joint case, b I date the form.	oth are equally responsible for supplying correct	information. Both debtors must
	nd accurate as possible. If more space ur name and case number (if known).	is needed, attach a separate sheet to this form. Or	ı the top of any additional pages,
Part 1: List You	ur Creditors Who Have Secured Claims		
information bel	ow.	D: Creditors Who Have Claims Secured by Proper	,
identify the cred	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's Un	nited Federal Credit Union	☐ Surrender the property.	□ No
name:		☐ Retain the property and redeem it.	<u>_</u>
Description of	2002 Handa CDV 06000 miles	Retain the property and enter into a	■ Yes
	2003 Honda CRV 96000 miles	Reaffirmation Agreement.	
property		☐ Retain the property and [explain]:	
securing debt:			<u></u>
Port 2: Liet Vou	ur Unevnired Personal Preparty Leases		
For any unexpired	ur Unexpired Personal Property Leases I personal property lease that you listed	in Schedule G: Executory Contracts and Unexpir	red Leases (Official Form 106G), fill
		nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)	
Describe your un	expired personal property leases		Will the lease be assumed?
			_
Lessor's name:			□ No
Description of leas Property:	seu		П Voo
			☐ Yes
Lessor's name:			□ No
Description of leas	sed		□ NO
Property:			☐ Yes
Lessor's name:			
Official Form 108	Statement of I	ntention for Individuals Filing Under Chapter 7	page 1

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Debtor 1 JAMES RO WING Debtor 2 CHRISTINA LORINE DAWN WING	Case number (if known)
Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention all property that is subject to an unexpired lease. X /s/ JAMES RO WING	pout any property of my estate that secures a debt and any personal X /s/ CHRISTINA LORINE DAWN WING
JAMES RO WING Signature of Debtor 1	CHRISTINA LORINE DAWN WING Signature of Debtor 2
Date	Date July 2, 2018

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Nevada

In	JAMES RO WING TE CHRISTINA LORINE DAWN WING		Case No.		
	OTIMOTIMA EORINE BANN VIINO	Debtor(s)	Chapter	7	
	DISCLASUDE OF COMPENS	ΑΤΙΩΝ ΩΕ ΑΤΤΩΙ	ONEV EOD DE	DTAD(C)	
	DISCLOSURE OF COMPENS				
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankruptcy,	or agreed to be paid	to me, for services rend	ered or to
	For legal services, I have agreed to accept		\$	665.00	
	Prior to the filing of this statement I have received			665.00	
	Balance Due		\$	0.00	
2.	\$ of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compens	ation with any other person	unless they are meml	pers and associates of m	y law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				firm. A
6.	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspect	s of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statemed c. Representation of the debtor at the meeting of creditors at d. Representation of the debtor in adversary proceedings at e. [Other provisions as needed] 	ent of affairs and plan which and confirmation hearing, ar	may be required; and any adjourned hear		otcy;
7.	By agreement with the debtor(s), the above-disclosed fee de	pes not include the following	g service:		
		CERTIFICATION			
thi	I certify that the foregoing is a complete statement of any ags bankruptcy proceeding.	greement or arrangement for	payment to me for re	epresentation of the deb	tor(s) in
	July 2, 2018	/s/ Timothy P. Po	st. Esa.		
	Date	Timothy P. Post,	Esq.		
		Signature of Attorne Law Offices of Ti			
		P.O. BOX 12313	-		
		Reno, NV 89510 (775) 322-7980 F	ax: (775) 322-3974		
		TimPostLaw@ya			
		Name of law firm			

United States Bankruptcy Court District of Nevada

In re	JAMES RO WING CHRISTINA LORINE DAWN V	VING	Case No.	
		Debtor(s)	Chapter	7
	VER	RIFICATION OF CREDITOR	MATRIX	
he abo	ove-named Debtors hereby verify	y that the attached list of creditors is true and c	correct to the best	of their knowledge.
	, ,			C
Date:	July 2, 2018	/s/ JAMES RO WING		
		JAMES RO WING		
		Signature of Debtor		
Date:	July 2, 2018	/s/ CHRISTINA LORINE DAWI	N WING	
		CHRISTINA LORINE DAWN W	/ING	

Signature of Debtor

JAMES RO WING CHRISTINA LORINE DAWN WING 4465 BOCA WAY SPACE NO. 68 Reno, NV 89502

Timothy P. Post, Esq. Law Offices of Timothy Post P.O. BOX 12313 Reno, NV 89510

Aaron Sales and Lease Acct No F995 1015 Cobb Place Blvd Kennesaw, GA 30144

AD ASTRA REC Acct No 4735 3611 N. Ridge R104 Wichita, KS 67205

Capital One Acct No 0000 POB 30285 Salt Lake City, UT 84130

Collection Service of Nevada Acct No 8214 777 Forest St. Reno, NV 89509

Credit One Bank Acct No 0000 POB 98873 Las Vegas, NV 89193

Jefferson Capital systems Acct No 3346 16 McLeland Rd. Saint Cloud, MN 56303

Kings Credit Service Acct No 3270 510 North Douty Street RE: Community Med. Center Hanford, CA 93230

LVNV Funding, LLC Acct No 0000 POB 10497 Greenville, SC 29603

Midland Credit Management Acct No 0000 POB 939019 San Diego, CA 92193 Nevada West Financial

Outsource Receivables Management Acct No 6151 372 24th St. Suite 300 Re: Umpqua Bank Ogden, UT 84401

Paycheck Advance Acct No xxxx/ 4977 75B West Plumb Lane Reno, NV 89509

Prefered Credit Acct No 1560 POB 1679 Saint Cloud, MN 56302

Rapid Cash Acct No 0000 690 E. Prater Way Sparks, NV 89431

Simple Rto LLC Acct No 2016 1225 E Fort Union Blvd Sute 300 Midvale, UT 84047

Social Security Administration Acct No 0000 5107 Leesburg Pike Falls Church, VA 22041

United Federal Credit Union Acct No 5212 2807 S. State St. Saint Joseph, MI 49085

Verizon Wireless Acct No 0000 POB 26055 Minneapolis, MN 55426